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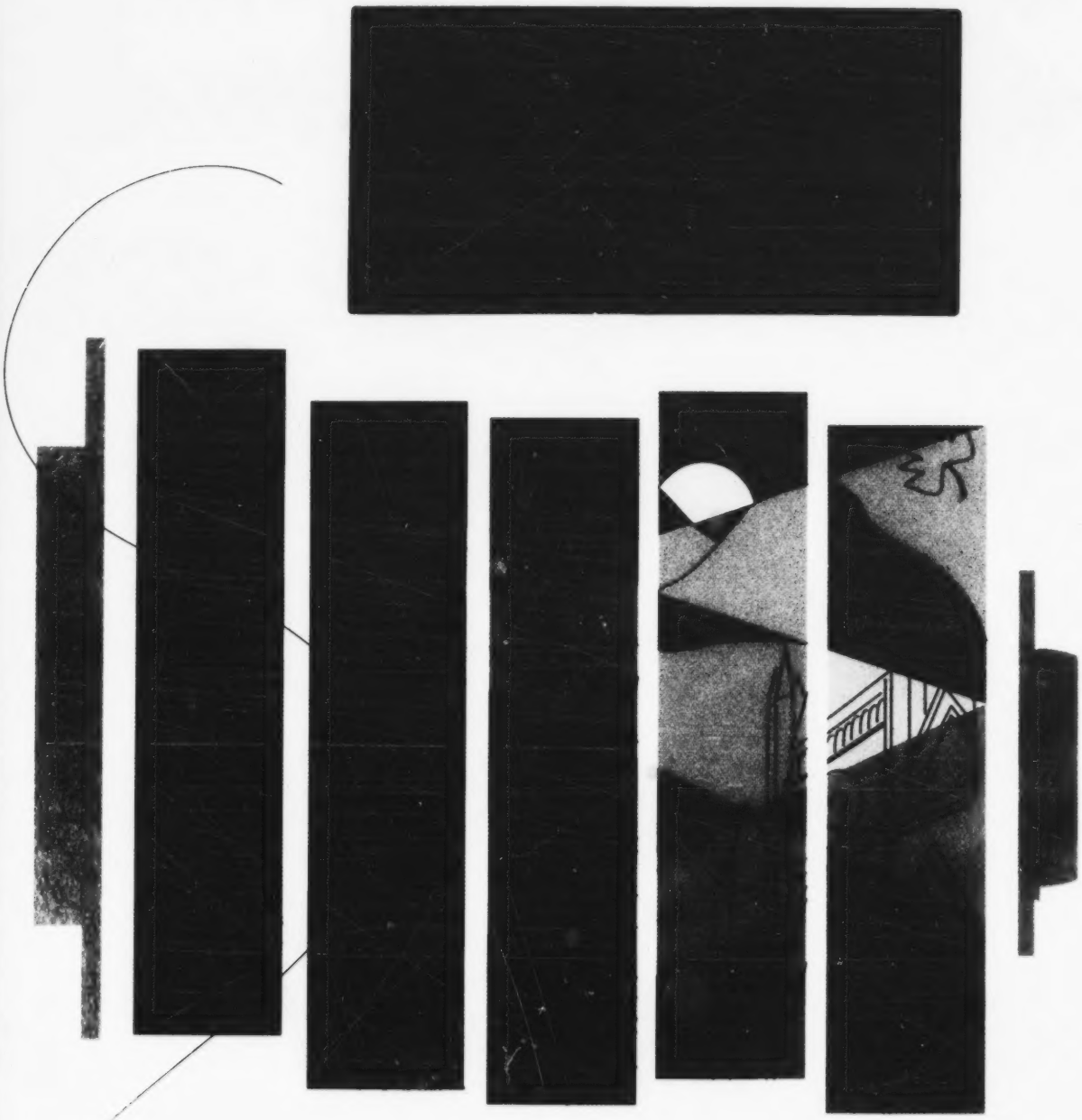

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Research Report

An Investigation into the Characteristics of Substance-Abusing Women Offenders : Risk, Need and Post-Release Outcome

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An Investigation into the Characteristics of Substance-Abusing Women Offenders:

Risk, Need and Post-Release Outcome

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EXECUTIVE SUMMARY

Programming research for women offenders is a fairly modern phenomenon. Moreover, until recently, there was only one federal correctional facility for female federal offenders. The opening of five new federal facilities, however, emphasized the need to provide an appropriate environment to manage and rehabilitate women offenders. Community reintegration is a valued goal of Correctional Services Canada (CSC) and development of treatment programs for women is viewed as an important component to facilitate offenders' release. Accordingly, the present report focuses on issues relating to substance abuse in the federal female offender population, as this is a demonstrated treatment need for many women offenders.

The present investigation compared women offenders who were substance abusers to those who were not. The groups were compared on a number of different criteria: risk and need variables, demographic characteristics, and recidivism data. To obtain the required information for the present study, CSC's automated data base, the Offender Management System (OMS) was accessed in conjunction with the Canadian Police Information Centre (CPIC) records. The final sample comprised 251 women offenders for whom institutional program participation information was available. Almost 60% of those had successfully completed a substance abuse treatment program at some point during their incarceration.

The first set of comparisons focused on demographic information (age, race). Statistical analyses revealed that the substance abusers were younger than their non-abusing counterparts. The mean age for the former group was 32.7 years compared to 34.9 years for the non-abusers. Results also indicated that Aboriginal women were over-represented amongst substance abusers. An extremely high proportion (93%) of Aboriginal women was classified as substance abusers, compared to 49% of non-Aboriginal women. This difference

was statistically significant, and highlights the need for substance abuse programming tailored to Aboriginal women.

Comparisons on overall risk ratings also demonstrated significant between-group differences. The majority of substance abusers were classified as medium (46%) and high-risk (26%) offenders whereas only 28% were low-risk. Non-abusers, on the other hand, were predominantly low-risk (60%), with only 17% classified as medium-risk, and 23% high-risk.

Substance abusers differed from non-abusers on several criminal history variables as well. Substance abusers tend to start their criminal careers at an earlier age compared to non-abusers, with 39% of them having youth court experience compared to only 8% of non-abusers. Data revealed that substance abusers were also more likely to have adult court experience. Not surprisingly, they were also more likely to have previous escape attempts or 'unlawfully at large' convictions on their criminal records. Finally, they were five times as likely to have been placed in (disciplinary) segregation as compared to non-abusers.

Comparisons were also performed on the global need ratings assigned (at intake) to both groups of women offenders. Results indicated that the majority of non-abusers were classified as low-need (56%), whereas 25% were medium-need and only 19% were high-need. Many substance abusers, on the other hand, were classified as high-need (47%). An almost equal number (41%) were categorized as medium-need and only 13% were low-need. The substance abusers exhibited more difficulties in five of seven need domains examined, including associates, attitudes, employment, marital/family, and (as expected) substance abuse.

When groups were compared on individual need indicators, analyses produced significant between-group differences. Substance abusers consistently had more difficulties than their non-abuser counterparts. Given the selection criteria for grouping the study participants, many of the obtained results were

expected. For example, the findings confirmed that substance abusers had more substance-abusing friends (85%) and possessed attitudes more favourable towards substance abuse (24%) than non-abusers. However, substance abusers also had more difficulty in a number of domains unrelated to substance abuse. This suggests that substance abuse problems are not uni-dimensional and interact with a number of criminogenic need areas. Notably, previous studies (Fabiano, 1993; Lightfoot & Lambert, 1992; Shaw et al., 1991) have suggested that substance abuse serves to exacerbate problems in other areas of one's life.

A final set of comparisons examined the recidivism rates of the study sample. There was a trend for substance abusers to recidivate at a higher rate than non-abusers; however, this was not statistically significant. Next, the released substance abusers that completed relevant institutional programming were compared to their untreated counterparts on post-release outcome. Although the recidivism rates for both groups were relatively low, those who had participated in substance abuse programming were significantly less likely to return to custody than their untreated counterparts. Importantly, a comparison on global risk ratings revealed that differences in recidivism were not due to a between-group difference in overall risk. This bodes well for the Service's institutional substance abuse programs, although prospective research is needed to support a definitive causal link between substance abuse programming and lowered recidivism amongst women offenders.

In conclusion, results of the present study reveal clear and reliable differences between substance abusers and non-abusers in a variety of areas assessed at intake. Moreover, of women with substance abuse problems, those who complete relevant programming fare better after release than their untreated counterparts. It is therefore posited that appropriate assessment, classification, and intervention with women substance abusers can significantly increase their potential for successful community reintegration. This study provides preliminary support for the efficacy of substance abuse treatment for incarcerated women.

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INTRODUCTION

An Investigation into the Characteristics of Substance-Abusing Women Offenders: Risk, Need, and Post-Release Outcome

There is an extremely high prevalence of substance abuse among offenders. More specifically, it has been reported that approximately 70% of federal inmates have difficulties with drug or alcohol abuse (Fabiano, 1993). In addition, it has been noted that many, if not most, of these offenders have problems in other areas of community and personal functioning. For example, research suggests that substance abusers have a number of problems in cognitive, emotional, environmental/social, and behavioral functioning. Moreover, these other needs may mediate the negative effects of substance abuse problems experienced by particular offenders. Therefore, effective treatment programs for substance abusers must address a variety of need areas as well as intensively focusing on the substance abuse problem itself (Fabiano, 1993).

Although the majority of offenders are substance abusers, several studies have reported that female offenders in particular have a high rate of substance abuse problems (Blanchette, 1996; Tien, Lamb, Bond, Gillstrom, & Paris, 1993). A comparison between the characteristics of substance abusing and non-abusing female offenders should provide important insight into an appropriate program structure for substance abusing women. The present investigation examines this issue in detail.

There have been few studies focusing on the characteristics of substance abusing women offenders. Lightfoot and Lambert (1991; 1992) assessed the prevalence of drug problems of offenders incarcerated at the Prison for Women in Kingston, Ontario using the Drug Abuse Screening Test (DAST). The DAST was administered to 80 incarcerated women, and it was reported that 14% of the women surveyed had severe drug-related problems. On the other hand, only 35% of the women offender population at the Prison for Women reported that

they did not have *any* problems related to drugs. These data confirm the high prevalence of substance abuse within the federal female offender population in Canada.

Lightfoot and Lambert (1991; 1992) also requested the women offenders to detail their drinking patterns. Of those surveyed, 25% described themselves as alcoholics. Notably, 45% of the women surveyed reported that they had experienced substantial problems related to their substance use. These women highlighted difficulties in the areas of family (81%), legal (69%), and work and health issues (53%). Again, these results support the view that substance abuse is a significant problem for the majority of federal women offenders, and adversely affects their community functioning in various of ways.

The problems caused by substance abuse do not singularly affect community functioning. These needs are also intricately related to their criminal offending. Shaw et al. (1991) conducted a survey of provincial prisoners and federal women offenders residing at the Prison for Women. This survey examined the relationship between the offenders' substance abuse problems and their prior criminal records. The authors reported that 120 of the 170 women (71%) surveyed indicated that drugs or alcohol played a role in their offences. Furthermore, 52% of the sample reported that they were under the influence of a substance when they committed their current offence.

Further evidence for the relationship between substance abuse and criminality in women offenders was derived from research by Lightfoot and Lambert (1991; 1992). They indicated that most of the women who used a substance on the day of their offence report that it had negatively affected their judgment. Sixty percent believed that their use of a substance seriously impaired their decision-making abilities. Only 17% reported that the use of a substance did not negatively impact on their behaviour. Therefore, the vast majority (83%) of those offenders who used a substance on the day of their offence agreed that it impaired their judgment to some degree.

The above findings certainly suggest that substance abuse has a significant negative impact on women offenders' ability to make rational, prosocial choices and likely contributes to certain at-risk individuals' criminal behaviour.

The purpose of the present investigation is to compare the characteristics of female substance abusing offenders to non-abusing offenders on intake assessment data, including demographic characteristics, criminal history risk, and various criminogenic needs. These comparisons will provide important information regarding the differences between substance abusers and non-abusers. More importantly, analyses may identify specific cognitive, emotional, behavioural, and environmental/social needs of women offenders with substance abuse problems. This information is paramount for relevant and empirically derived programming for women substance abusers.

Finally, the women who completed institutional substance abuse programs will be compared to untreated substance abusers on post-release outcome (i.e., recidivism). This analysis will provide an examination of the association between completion of institutional substance abuse programming and recidivism.

METHOD

The present investigation compared 'substance-abuser' women offenders to women offenders who were not substance abusers on demographic criteria, risk/need data, and post-release outcome. A wide definition of 'substance abuser' was used, and included all women who were assessed and recommended for substance abuse treatment at intake. The assessment data used in this study was collected from the Offender Management System (OMS; an automated database). Outcome data were derived from Canadian Police Information Center (CPIC) records.

OMS is an automated database that stores a wealth of information pertaining to federal offenders currently or formerly incarcerated in Canada. Most of the required information for the present study was obtained through this source. For example, OMS stores all Offender Intake Assessment (OIA) data for every offender. The correctional plans included within OMS were used to test whether the programs that were initially recommended for the offenders at intake were actually completed during incarceration. Finally, offender progress summaries and other information relating to successful and unsuccessful program completion were also obtained through OMS.

The initial sample included all (354) federal female offenders who had received an Offender Intake Assessment (OIA) at admission to a federal correctional facility. A number of subjects had to be dropped from the study due to either a lack of available finger print serial numbers, the high profile nature of the case, or missing OIA data. In addition, 84 offenders were dropped from the initial analyses because they did not participate in any form of correctional treatment program or all program information was missing. The final sample included 251 federal women offenders who had participated in at least one treatment program during their incarceration. Since the OIA data played an extremely important role in the development of this project, a brief description of the information obtained through the OIA process is provided below.

The Correctional Service of Canada has been using the OIA since 1994. It is the standard intake assessment used by all federal institutions in Canada. The OIA procedure examines a broad range of factors of the offenders and it serves as the fundamental basis for determining their individualized correctional plans. The OIA has two main components: Criminal Risk Assessment (CRA) and Case Needs Identification and Analysis (CNIA). Both of these sections provide important information for offender assessment and classification. These two components will be discussed in more detail in later sections.

CPIC records were used to determine the official offence history of each of offender included in the present sample. A comprehensive coding manual (Appendix A) was developed to measure all offences that had resulted in the current federal conviction for each particular subject. The information provided by the CPIC records was divided into three different conviction categories. Past history included all offences previously committed by the offender. The current offence category recorded all offences included in the present conviction (i.e., those resulting in the first incarceration post-1994). A broad definition of 'official recidivism' was used. Specifically, it included return to prison for *any reason* after release from the 'current' incarceration.

The final stage in the research process involved examining the correctional plans for all offenders in detail. A coding guide (Appendix B) was developed to document all information concerning the primary need areas that were recommended to be addressed during treatment for each offender. In addition, the principle components for each need were recorded. The program modules and progress summaries provided information on actual enrollment and this information was also recorded in the coding guide. This type of overlapping information provided an opportunity to examine how closely the correctional plans were followed in the assignment of substance abuse treatment programs for women offenders.

The final sample of 251 women offenders was evaluated on a number of criteria. One set of analyses focused on the details of their past and present criminal convictions. The degree of agreement between the proposed treatment programs found in the correctional plan and the programs that the offenders actually completed while incarcerated was also tested. This analysis permitted a determination of whether the offenders recommended for substance abuse treatment actually received such intervention while incarcerated. Finally, recidivism data for released offenders was gathered to determine whether participation in substance abuse programming was associated with more successful community reintegration.

It should be noted that stringent criteria for statistical significance were used due to the nature and number of pairwise comparisons performed in the current study. This reflects an effort to reduce potential Type 1 error associated with conducting multiple, non-orthogonal, between-group comparisons. Specifically, unless otherwise stated, criterion for statistical significance was set at .001.

RESULTS

A series of statistical analyses focused on comparing substance abusing female offenders to their counterparts who were not substance abusers. As mentioned, the 'substance abuser' group included women assessed (at intake) as requiring substance abuse treatment (n = 143). The 'non-abuser' group included all remaining women who had received an OIA, and were not recommended for substance abuse treatment (n = 108). Groups were compared on demographic variables, security level, global risk/need scores, need domains and indicators, various aspects of criminal history, and post-release outcome.

Concordance between Program Recommendation and Enrollment

In a recent study of women offenders in cognitive skills training, investigators reported markedly low concordance rates between program recommendations (as per correctional plan) and actual program completion (Dowden & Blanchette, 1997). Specifically, according to OMS data, less than one-third of women offenders recommended for cognitive skills training actually received it during incarceration.

Fortunately, concordance between recommendations and enrollment for women offender substance abuse programming surpassed that found in the cognitive skills study. Of the 143 women recommended for substance abuse intervention, 86 (60%) actually completed it. Also, of those women who completed institutional substance abuse programming (n = 129), the majority (67%) were recommended as per their correctional plans at intake.

High concordance between the program recommendations provided by the parole officer and enrollment within the targeted programs is desirable. The parole officers who make these recommendations review comprehensive

information regarding an offender and then provide the most informed judgment possible concerning his or her criminogenic needs and required programs.

There may be a number of reasons for the lack of concordance between program recommendations and actual program completion. For one, it is possible that the facility in which the offender resides does not provide the specific recommended intervention. Second, the offender may resist placement within the recommended treatment program. Some offenders are placed in segregation, transferred, or paroled mid-treatment. Of course, this would then prevent them completing the program. Finally, it is possible the staff member responsible for implementation of the correctional plan feels that recent developments in the life of the offender necessitate a deviation from the correctional treatment plan. Thus, there are numerous potential reasons for why an offender does not complete the recommended treatment program. Such 'slippage', however, remains an issue to be monitored in the evaluation of correctional programs.

Security Level

Security level at admission was available for 102 of the 'non-abuser' women and 142 of the substance abusers. Examination of the data revealed that 17% of the women substance abusers were classified as maximum-security as compared to only 4% of non-abusers. Accordingly, 31% of the substance-abusing women were classified as minimum -security whereas the majority (60%) of non-abusers were so classified. Statistical analyses revealed that these results were highly significant, as presented in Table 1.

Table 1: Percentage Distribution of Security Level by Substance Abuse

Security Level	Substance Abusers		Non- Abusers	
Minimum	**44**	**31%**	**61**	**60%**
Medium	**72**	**51%**	**37**	**36%**
Maximum	**24**	**17%**	**4**	**4%**
Total	**140**		**102**	

Note: Chi-square test of significance; $p < .001$

Demographic Information

On average, the substance abusers were younger than the comparison group. Substance abusers ranged in age from 19 to 58 years, with a mean of 32.7. The age range for the non-abusers was 20 to 64 years, with a mean of 34.9. Although there was a noted age differential between groups, analyses failed to render statistical significance. However, it should be noted that the results were extremely close to obtaining the appropriate significance level ($t(249) = 2.0$; $p= .052$).

Offenders were also compared on their Aboriginal status. Results indicated that a significantly higher proportion of substance abusers were Aboriginal offenders. Almost all (93%) of the Aboriginal women in this study were recommended for substance abuse programming. Only 49% of non-Aboriginal women, on the other hand, were categorized as substance abusers. These results were highly statistically significant ($p<.001$).

Criminal Risk Assessment

The Criminal Risk Assessment (CRA) is one of the two central components of the OIA process. The purpose of the CRA is to provide an overall risk rating for each offender. The CRA examines details of the past and current conviction record of the offender, and other relevant information regarding potential risk factors from the criminal profile report. These sources of information are combined to yield an overall risk rating of 'low', 'medium', or 'high'.

Global risk ratings were available for almost all (n = 248) of the women in the sample. Statistical analyses revealed significant differences in overall risk levels between substance abusers and non-abusers ($\chi^2 = 29.8$; $p<.001$). More specifically, 27% of the substance abusers were high risk, 45% were medium risk and 28% were classified as low-risk. The non-abusers, on the other hand, were mostly classified as low-risk (60%). Table 2 presents the risk ratings received for each category of offender.

Table 2: Percentage Distribution of Overall Risk Ratings by Substance Abuse

Overall Risk Rating	Substance Abusers		Non-Abusers	
Low Risk	**40**	**28.0%**	**63**	**60.0%**
Medium Risk	**65**	**45.4%**	**18**	**17.1%**
High Risk	**38**	**26.6%**	**24**	**22.9%**
TOTAL	***143***		***105***	

Note: Chi-square test of significance; p < .001

Specific criminal history risk variables were also examined. Interestingly, statistical analyses revealed significant between-group differences on almost all selected criminal history background indicators. In each case, substance abusers had significantly more problems in these areas.

Table 3 presents percentage distributions of selected criminal history background indicators for substance abusers and non-abusers. Clearly, the substance abusers started their criminal careers at a younger age than non-abusers. Over one-third (39%) of the substance abusers had previous youth court experience, compared to only 8% of the non-abusers. The same pattern of results was found in adult court experience, with substance abusers having significantly more experience in adult court.

Table 3: Percentage Distribution of Selected Criminal History Background Indicators: Substance Abusers and Non-Abusers

	Substance Abusers (N=107)	Non-Abusers (N=84)
Previous Youth Court*	38.7%	8.3%
Community Supervision*	25.7%	6.0%
Open Custody*	22.2%	3.6%
Secure Custody	18.7%	6.0%
Previous Adult Court*	77.7%	40.5%
Community Supervision*	65.2%	28.6%
Provincial Terms*	62.5%	20.2%
Federal Terms*	18.8%	6.0%
Previous:		
Segregation (disciplinary)*	21.9%	4.9%
Escape/UAL*	18.9%	3.6%
Failure on Conditional Release*	28.8%	9.5%
< 6 Months Since Last Incarceration	17.9%	3.6%

Note: Chi-square tests of significance; *p<.001

Examination of Table 3 reveals that the substance abusers had more disciplinary segregation and more extensive escape histories as compared to non-abusers. Breaches of trust were also more common among substance abusers, with almost one-third having failed on conditional release at some point. Finally, substance abusers were more likely to have been incarcerated within the six months prior to their current offence as compared to non-abusers.

Between-group differences were also noted in the types of offences committed. More specifically, 41% of substance abusers were incarcerated for a robbery offence, compared to only 16% of the non-abusers. In fact, the groups differed in terms of violent offence histories. While 58% of substance abusers had a violent offence in their past or current criminal history, this was true for only 32% of the non-abusers. These results suggest differential patterns of offending between substance abusers and their non-abusing counterparts.

Case Needs Identification and Analysis

The Case Needs Identification and Analysis (CNIA) is the second major component of the OIA process. The purpose of the CNIA is to identify the criminogenic needs of the offender and to make recommendations on how to best address these needs. In order to make these determinations, the CNIA considers a large amount of information related to the personality of the offender as well as his/her current life situation. Multiple, specifically defined need indicators are examined, covering seven major need domains: associates/social interaction (11 indicators), attitudes (24 indicators), community functioning (21 indicators), employment (35 indicators), marital/family (31 indicators), personal/emotional orientation (46 indicators), and substance abuse (29 indicators). A complete listing of all need indicators is located in Appendix C.

Once every indicator has been scored, the offender receives an overall rating on each target domain based on a four-point continuum. The

classifications received reflect the offender's degree of need for each domain of interest. The scale ranges from "asset to community adjustment" to "significant need for improvement". The two intermediate ratings are "no need for improvement" and "some need for improvement". It should be noted that "asset to community adjustment" is not applicable to the substance abuse and personal/emotional domains.

For the present investigation, the rating scale was collapsed and the scores were dichotomized to indicate the presence or absence of a particular need. Specifically, 'asset to community adjustment' and 'no need for improvement' were collapsed to indicate absence of need. Domains ranking as 'some' or 'considerable' need for improvement was collapsed to indicate presence of need. These data were available for 112 of the substance abusers and 81 of the women offenders in the 'non-abuser' comparison group. Percentage distributions, by substance abuse classification, are reported in Table 4.

Table 4: Identified Needs of Substance Abusing and Non-Abusing Federal Women Offenders at Admission

Type of Need	Substance Abusers (N=112)	Non-Abusers (N=81)
Associates*	93.7%	67.6%
Attitudes*	34.3%	13.0%
Community Functioning	80.4%	70.4%
Employment*	88.1%	67.6%
Marital/Family*	83.2%	63.9%
Personal/Emotional	94.4%	86.1%
Substance Abuse*	87.4%	20.4%

Note: Chi-square test of significance; * p<.001

Table 4 clearly indicates that both substance abusers and non-abusers have difficulties in a large number of need areas. Notably, statistical analyses revealed highly significant between-groups differences in five of the seven need domains. As expected, those recommended for substance abuse treatment had significantly greater difficulties in the substance abuse domain with almost 90% exhibiting difficulties compared to only 20% of the 'non-abuser' group. Importantly, however, they also had significantly more problems with associates, attitudes, employment, and their marital/family situation. Although data showed a trend for substance abusers to have more problems in the 'community functioning' and 'personal/emotional' domains as well, differences failed to reach statistical significance at the adjusted (.001) level. Taken together, these results suggest that substance abuse in women offenders is generally symptomatic of multiple criminogenic needs.

To explore differences between groups in more detail, between-group comparisons on the individual need indicators were also conducted (see Appendix C for a complete listing). This provided a more specific examination of the individual need domains, allowing a precise determination of where the differences emerge between groups of women. However, it should be noted that not all of the individual need indicators were available for the entire sample. Rather, OIA indicator data were available for 195 of the 251 study participants.

Many of the 197 pairwise comparisons resulted in significant between-groups differences. To adjust for the probable inflation in Type I error rate, conservative alpha level of .001 was used. Notably, in every case, the substance abusers were found to have significantly more difficulties than the comparison group of non-abusers. As expected, the substance abuse domain had the largest number of indicators that discriminated between groups and these were also the most statistically robust differences found.

Table 5 provides a breakdown of the two discriminating indicators within the 'associates/social interaction' domain.

Table 5: A Breakdown of Discriminating 'Associates' Need Indicators as Assessed by the Offender Intake Assessment Process

Associates/Social Interaction Indicators	Substance Abusers (N=112)	Non-Abusers (N=83)
Substance Abusers as Friends	84.7%	28.0%
Criminogenic Living	39.2%	12.0%

Note: Chi-square test of significance; p <.001 for all comparisons shown.

Not surprisingly, compared to non-abusers, the substance abusers were significantly more likely to have substance-abusing and criminal friends. Accordingly, over one-third of substance abusers were assessed as having a criminogenic lifestyle.

Five employment indicators yielded reliable between-group differences. Once again, the women offenders recommended for substance abuse treatment showed more needs than their 'non-abuser' counterparts. A breakdown of reliably discriminating employment indicators is presented in Table 6.

Table 6: A Breakdown of Discriminating 'Employment' Need Indicators as Assessed by the Offender Intake Assessment Process

Employment Indicators	Substance Abusers (N=112)	Non-Abusers (N=83)
Has less than Grade 10	54.8%	28.9%
Unemployed 90% or more	58.4%	26.5%
Unemployed 50% or more	79.7%	54.2%
Unstable Job History	78.8%	33.7%

Note: Chi-square test of significance; p<.001 for all comparisons shown.

Results suggest that the non-abusers are more educated than the substance abusers. Vocational indicators demonstrate that the non-abusers have more stable employment histories, and spend smaller proportions of time on unemployment or social assistance.

Four of the marital/family indicators yielded statistically significant between-group differences. Perhaps the most notable difference was detected with the "unattached" indicator. Substance abusers were much more likely to be unmarried (or otherwise uninvolved) (28%) compared to non-abusers (6%). Results of chi-square analyses for the marital/family indicators are located in the table below.

Table 7: A Breakdown of Discriminating 'Marital/Family' Need Indicators as Assessed by the Offender Intake Assessment Process

Marital/Family Indicators	Substance Abusers (N=112)	Non-Abusers (N=83)
Unattached	28.1%	6.0%
Poor Paternal Care	53.6%	29.3%
Dysfunctional Parents	60.9%	36.6%
Criminal in Family	55.4%	26.8%

Note: Chi-square test of significance; p<.001 for all comparisons shown.

Compared to non-abusers, women recommended for substance abuse treatment were assessed as having more dysfunctional family relationships. Specifically, they were more likely to have been raised in a dysfunctional environment with poor care from their fathers. In addition, they were also more likely to have relatives who have been in conflict with the law. Thus, problematic

family relationships appear to have preceded (and perhaps contributed to) substance abuse problems.

Table 8 provides a breakdown of reliably discriminating indicators in the 'attitude' domain. As shown, between-group differences emerged in four comparisons of the 11 indicators. Substance abusers had much more negative attitudes towards the law, police, corrections, and rehabilitation. While this likely reflects their more extensive criminal histories, it may also signal lower potential for successful community reintegration. Moreover, there was also a statistical trend for substance abusers to view basic life skills and employment as having no value, and many were assessed as lacking direction and non-conforming.

Table 8: A Breakdown of Discriminating 'Attitude' Need Indicators as Assessed by the Offender Intake Assessment Process

Attitude Indicators	Substance Abusers (N=112)	Non-Abusers (N=83)
Negative Towards the Law	23.6%	3.6%
Negative Towards the Police	20.4%	2.4%
Negative Towards Corrections	22.9%	3.7%
Negative Towards Rehabilitation	10.8%	0.0%

Note: Chi-square test of significance; p<.001 for all comparisons shown.

Despite the fact that there were no significant between-group differences in overall scores on community functioning, micro-level analyses detected two discriminating indicators. Percentage distributions for these, by group, are presented in Table 9.

Table 9: A Breakdown of Discriminating 'Community Functioning' Need Indicators as Assessed by the Offender Intake Assessment Process

Community Functioning Indicators	Substance Abusers (N=112)	Non-Abusers (N=83)
Has Unstable Accommodation	55.4%	25.3%
Prior Use of Social Assistance	89.0%	68.3%

Note: Chi-square test of significance; p<.001 for all comparisons shown.

Again, the 'substance abuser' group was noted to have more problems than their 'non-abuser' counterparts. Substance abusers were over twice as likely to have unstable accommodation in the community as compared to non-abusers. Consistent with previous findings concerning employment, the vast majority of substance abusers had used social assistance prior to incarceration. While this also characterized the 'non-abuser' group, their use of social assistance was not as extreme as the substance abusers.

A number of the personal/emotional orientation indicators produced reliable between-group differences. Again, in each case, women that were recommended for substance abuse programming had greater needs than their counterparts. Statistically significant results of between-groups comparisons in the 'personal/emotional' domain are displayed in Table 10.

Table 10: A Breakdown of Discriminating 'Personal/Emotional' Need Indicators as Assessed by the Offender Intake Assessment Process

Personal/Emotional Indicators	Substance Abusers (N=112)	Non-Abusers (N=83)
Poor Stress Management	69.6%	43.4%
Low Frustration Tolerance	43.8%	19.3%
Thrill Seeking	33.6%	10.8%
Hospitalized Past	34.3%	13.6%
Past Program Participation	31.5%	12.0%

Note: Chi-square test of significance; p<.001 for all comparisons shown.

As indicated in Table 10, women with substance abuse problems were more often assessed as having low frustration tolerance, and most have few appropriate skills to manage stress. Moreover, they were more likely to have been hospitalized for mental health reasons, and almost one-third were involved with mental health programs at the time of assessment. Perhaps women offenders who lack proper stress management skills are more likely to turn to substance abuse as a maladaptive means of coping.

The final set of need indicators examined were within the substance abuse domain itself. As expected, all of these indicators yielded reliable between-group differences with the substance abusers having more problems each time. Over half of those recommended for substance abuse treatment began using alcohol and/ or drugs at an early age, and for about two-thirds, their substance abuse resulted in law violations. This was true for only a small minority of 'non-abusers'. Percentage distributions, by group, of substance abuse domain indicators are shown in Table 11.

Table 11: A Breakdown of 'Substance Abuse' Need Indicators as Assessed by the Offender Intake Assessment Process

Substance Abuse Indicators	Substance Abusers (N=112)	Non-Abusers (N=83)
Early Age Drinking	48.7%	10.8%
Drink Frequently	42.1%	4.8%
Drinking Binges	51.8%	8.4%
Combines Alcohol and Drugs	49.1%	7.3%
Abuses Alcohol	65.5%	12.0%
Excess Drinking --Leisure	50.0%	6.1%
Excess Drinking-Socially	51.4%	7.3%
Excess Drinking to Relieve Stress	52.3%	9.8%
Drinking Interferes with Employment	28.2%	3.6%
Drinking Interferes with Marital/Family Relationships	47.3%	3.7%
Drinking Interferes with Associates	33.9%	4.8%
Drinking Provokes Law Violations	55.0%	4.8%
Drinking Interferes with Health	32.1%	1.2%
Drug Use at Early Age	53.6%	7.2%
Frequent Drug Use	51.3%	8.4%
Drug Use Sprees	56.2%	10.8%
Combines Different Drugs	48.2%	10.8%
Abuses Drugs	76.1%	18.1%
Leisure Drug Use	59.3%	12.0%
Social Drug Use	60.7%	12.0%
Uses Drugs to Relieve Stress	62.5%	12.2%
Drug Use Interferes with Employment	32.4%	6.1%
Drug Use Interferes with Marital/Family Relationships	55.4%	9.8%
Drug Use Interferes with Associates	45.4%	9.6%
Drug Use Provokes Law Violations	65.5%	11.0%
Drug Use Interferes with Health	48.2%	7.2%
Prior Assessment for Substance Abuse	37.4%	6.2%
Prior Participation in Substance Abuse Treatment	58.9%	9.8%
Prior Completion of Substance Abuse Treatment	41.8%	7.3%

Note: Chi-square test of significance; $p<.001$ for all comparisons

These findings attest to the discriminant validity of the OIA strategy by correctional staff. Intake assessment data are being correctly applied and should be employed to develop sound and clinically relevant correctional plans for women offenders. That only sixty percent of the women recommended for treatment (as per their correctional plan) actually received such programming while incarcerated, however, reflects the need for improvement in the assessment-classification-treatment continuum of care.

Risk/Need Ratings

Global ratings of case needs (classified as either 'low', 'medium', or 'high') are generated for each offender at intake. As with the CRA (global risk level), the non-abusers were predominantly lower in 'need' in comparison to the substance abusers. One quarter of the non-abusers were categorized as 'medium' need and only 19% were designated as 'high' need.

A minority of substance abusers were designated 'low' need (13%) and an additional 41% was classified, as 'medium' need. In contrast to the non-abusers, almost half of substance abusers (47%) were designated 'high' need. Table 12 provides a percentage distribution of composite risk/need levels for the substance-abusing and non-abusing federal women offenders of this sample.

Table 12: Percentage Distribution of Risk/Need Levels at Time of Admission

RISK/NEED LEVEL	Substance Abusers (N=112)	Non-Abusers (N=83)
Low-risk/Low-need	16 (11.2%)	50 (47.6%)
Low-risk/Medium-need	17 (11.9%)	11 (10.5%)
Low-risk/High-need	7 (4.9%)	2 (1.9%)
Sub-total	*40 (28.0%)*	*63 (60.0%)*
Medium-risk/Low-need	2 (1.4%)	7 (6.7%)
Medium-risk/Medium-need	36 (25.2%)	8 (7.6%)
Medium-risk/High-need	27 (18.9%)	3 (2.9%)
Sub-total	*65 (45.5%)*	*18 (17.2%)*
High-risk/Low-need	0 (0.0%)	2 (1.9%)
High-risk/Medium-need	5 (3.5%)	7 (6.7%)
High-risk/high-need	33 (23.1%)	15 (14.3%)
Sub-total	*38 (26.1%)*	*24 (22.9%)*

Note: Chi-square test of significance; p<.001

Recidivism

Statistical analyses were conducted to examine recidivism rates of this sample of offenders. In the current investigation, a broad definition of recidivism was used: return to custody for *any* reason. Thus, recidivists included those who had their conditional release revoked, those with new offences, and those with new violent offences. Of the 251 study participants, 74 were released some time prior to September, 1997. Therefore, analyses exploring recidivism rates are based on this subsample of women.

Forty-four of the 74 releasees were classified as substance abusers, as defined previously. The release rate for substance abusers was not significantly different from that of the non-abusers. Results demonstrated a 25% recidivism rate (n=11) by substance abusers. Of the 30 released women in the 'non-abuser' group, only 17% (n=5) returned to custody. While this difference is notable, it is not statistically significant. Moreover, it is suggested that failure to achieve the probability level ($p<.05$) for statistical reliability may be due to the small sample size.

Subsequent analyses focused on only those released offenders who had been recommended for institutional substance abuse treatment (n=44). In comparing the recidivism rates of substance abusers that completed relevant programming to their untreated counterparts, a statistically significant difference was found. Of the 27 treated substance abusers, only 3 (11%) returned to custody after release. The untreated substance abusers had a substantially higher recidivism rate ($p< .01$), with about half (47%) of the 17 women returning to custody.

In order to ensure that the above findings were not biased by between-group differences in risk level, treated (released) substance abusers were compared to their untreated (released) counterparts on overall risk level. Of concern was that of those released, perhaps the women who failed to complete treatment were higher risk at the outset.

A comparison that focused exclusively on the substance abuser group failed to detect any significant differences in risk level between treated and untreated substance abusers. In fact, approximately equal proportions were classified as 'high risk', with 11.8% of 'treated' substance abusers and 14.8% of 'untreated' substance abusers so-classified. These results highlight two important points. First, they show that lower risk women, regardless of treatment completion, were more likely to be released than their high risk counterparts.

Recall results presented in Table 12, which indicate that about 26% of substance abusers were classified as high risk. Of those released, however, only 13% were so-classified. Second, an approximately equal risk level for 'treated' and 'untreated' released substance abusers implies that between-group differences in recidivism rates cannot be attributed to differences in overall risk. Rather, results suggest that for women substance abusers, increased recidivism appears to be associated with failure to complete recommended institutional programming.

These findings bode well for our ability to assess and treat women offenders with substance abuse problems. Although the methodology of the current study precludes a causal explanation, it provides optimistic preliminary evidence for the effectiveness of institutional substance abuse treatment for female offenders.

CONCLUSIONS

The present investigation explored differences between federal women offenders who are substance abusers and those who are not. These two groups were compared on a number of different criteria assessed at intake: demographic information, risk (including security and escape), and criminogenic need. Analyses examining recidivism rates of 'substance abusers' versus 'non-abusers', and 'treated' versus 'untreated' substance abusers were also conducted.

Results indicated that a large number of risk indicators yielded significant between-group differences. In particular, the results revealed that substance abusers tended to start their criminal careers at an earlier age had more adult court experience, and were generally higher risk than non-abusers. Interesting between-group differences also emerged in the types of offences committed by both groups. In particular, a significantly higher number of substance abusers had violent offences in their past or index offences. These findings strongly suggest that substance abuse play an important role in the determination of when an offender will begin her criminal career, and how it will evolve thereafter. Perhaps, violence in women offenders may be mediated by a substance abuse problem.

Although the majority of federal female offenders have needs in multiple areas, substance abusers appear to have significantly more needs and were assigned higher overall need level ratings than their non-abuser counterparts. Statistically reliable differences were found in five of the seven overall target domains. These findings strongly support Fabiano's (1993) conclusions, that female offenders who are substance abusers possess a variety of problem areas beyond those directly related to substance abuse.

Analyses of individual need indicators revealed particularly robust between-group differences in a number of areas. Not surprisingly, all of the

substance abuse indicators yielded highly reliable between-group differences with substance abusers having more problems than non-abusers. It makes sense that offenders who are substance abusers would demonstrate more problematic attitudes, associates, and behaviours relating to substance abuse relative to non-abusers. These findings highlight the need for sequential programming with substance abusers.

Although all of the substance abuse indicators provided reliable between-group differences, there were a large number of indicators found to produce significant differences in other areas as well. For example, within the personal/emotional domain, poor stress management, low frustration tolerance, and thrill-seeking behaviour were all noted to be more prevalent amongst women referred for substance abuse programming. Moreover, these findings may provide additional explanations regarding why the women substance abusers had significantly more violent offences in their past and current criminal repertoire.

A comparison of substance abusers to non-abusers on recidivism yielded no reliable between-group differences. However, subsequent analyses revealed that low-risk substance abusers were released at a higher rate than their high-risk counterparts. Also, data showed a trend for higher recidivism amongst substance abusers (versus non-abusers). The small sample sizes may have prevented achieving statistical significance levels.

Focusing exclusively on released substance abusers and controlling for risk, the results clearly demonstrated that treated substance abusers were less likely to return to custody than their untreated counterparts. These results provide preliminary support for the effectiveness of substance abuse programming for federal women offenders.

The high proportion of women substance abusers in this study demonstrates the importance of examining this area more extensively in the

future. These results attest to the importance of providing intensive, structured substance abuse programming to female federal offenders. In particular, these types of programs should be directed to those identified through the intake assessment process.

Results of the current study have raised some important concerns regarding the continuum of offender care, from assessment to programming. For women offenders, there is a strong link between OIA information and program recommendations within the correctional plan. Indeed, correctional planning is a central purpose of OIA. However, results showed a considerable discordance at the next step of intervention, with large incongruities between program recommendations and actual program completion. Specifically, only 60% of women offenders who were recommended for substance abuse programming actually completed it during incarceration. As well, over 30% of the women involved in substance abuse treatment *were not* recommended clients. Thus, the low concordance cannot be attributed to a lack of treatment resources.

Another recent investigation (Dowden & Blanchette, 1997) has documented this discrepancy with cognitive skills programs for women. Additionally, in a national survey of treatment programs for violent offenders, Serin and Brown (1997) reported that less than 60% of institutional treatment providers use offenders' correctional plans in pre-treatment needs assessments. This suggests that the divergence between treatment recommendations and actual enrollment is not entirely due to offender non-compliance. Also, this problem of concordance appears to be unrelated to gender of the offender or type of programming.

This highlights the need to re-examine the correctional treatment process, from initial assessment to community reintegration. Since investigations are suggesting a break in the continuum of care, it is necessary to determine its nature. The OIA is a theoretically driven, comprehensive process developed to

yield treatment recommendations. As such, it is suggested that treatment recommendations so derived should be followed closely to maximize successful reintegration. Positive evidence for this position comes from results of the present study, with lower recidivism rates for substance abusers that followed correctional plan recommendations.

In summary, this research has identified important differences between substance abusing and non-abusing women offenders, reflecting the validity of the OIA strategy. It has also yielded preliminary evidence of treatment efficacy in the area of substance abuse intervention for women offenders. Finally, it has highlighted the area of correctional treatment planning as one that merits some attention with improvements likely to enhance the assessment and treatment of women offenders.

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APPENDIX A

Coding Manual for Official Criminal Convictions

FPS _____

Official Criminal History Record:

Enter the number of offenses (i.e. charges and convictions) for each individual crime. If there are none, enter 0. This section is to be coded exclusively from the official records contained in CPIC files, and includes only charges and convictions ***prior to*** *admission date.*

Nonviolent Offenses

1. __ __ Theft, break & enter, possession of housebreaking tools, possession of stolen property, theft of telecommunications, disguise with intent, forcible entry, unlawfully in a dwelling house.

2. __ __ Drug offenses (i.e., possession and trafficking).

3. __ __ Criminal negligence (includes serious driving offenses such as impaired or dangerous driving, failure to stop at the scene of an accident, hit- and run).

4. __ __ Fraud, forgery, false pretenses, impersonation, uttering, possession of stolen credit card.

5. __ __ Escape, unlawfully at large, prison breach.

6. __ __ Obstruction of justice, perjury, contempt of court, resist arrest, give contrary evidence.

7. __ __ Fail to appear in court, fail to comply with recognizance, fail to comply with probation order, breach of probation, breach of recognizance.

8. __ __ Miscellaneous offenses: vandalism, causing a disturbance, mischief, willful damage, trespassing, conspiracy to commit a non-violent offence, vagrancy, prostitution, minor driving offenses (e.g., driving while license suspended), public intoxication.

9. Date of first non-violent offence (yymmdd) ___/___/___.

Violent Offenses

10. __ __ Robbery, armed robbery, robbery with violence, extortion.

11. __ __ Arson, firesetting.

12. __ __ Uttering threats, participation in riot, intimidation.

13. __ __ Assault, assault causing bodily harm, wounding with intent, malicious wounding.

14. __ __ Possession of a weapon, possession of explosives, pointing a firearm.

15. __ __ Kidnapping, abduction, forcible confinement, forcible seizure.

16. __ __ Violent sex offenses (e.g., sexual assault)

17. __ __ Manslaughter.

18. __ __ Attempted murder, conspiracy to commit murder.

19. __ __ Second degree murder.

20. __ __ First degree murder.

21. Date of first violent offence (yymmdd) ___/___/___

Current (admitting) Offence(s):

Enter the number of offenses (i.e. charges and convictions) for each individual crime. If there are none, enter 0. This section is to be coded exclusively from the official records contained in CPIC files, and includes only charges and convictions in current term.

Nonviolent Offenses

1. __ __ Theft, break & enter, possession of housebreaking tools, possession of stolen property, theft of telecommunications, disguise with intent, forcible entry, unlawfully in a dwelling house.

2. __ __ Drug offenses (i.e., possession and trafficking).

3. __ __ Criminal negligence (includes serious driving offenses such as impaired or dangerous driving, failure to stop at the scene of an accident, hit- and run).

4. __ __ Fraud, forgery, false pretenses, impersonation, uttering, possession of stolen credit card.

5. __ __ Escape, unlawfully at large, prison breach.

6. __ __ Obstruction of justice, perjury, contempt of court, resist arrest, give contrary evidence.

7. __ __ Fail to appear in court, fail to comply with recognizance, fail to comply with probation order, breach of probation, breach of recognizance.

8. __ __ Miscellaneous offenses: vandalism, causing a disturbance, mischief, willful damage, trespassing, conspiracy to commit a non-violent offence, vagrancy, prostitution, minor driving offenses (e.g., driving while license suspended), public intoxication.

Violent Offenses

9. __ __ Robbery, armed robbery, robbery with violence, extortion.

10. __ __ Arson, firesetting.

11. __ __ Uttering threats, participation in riot, intimidation.

12. __ __ Assault, assault causing bodily harm, wounding with intent, malicious wounding.

13. __ __ Possession of a weapon, possession of explosives, pointing a firearm.

14. __ __ Kidnapping, abduction, forcible confinement, forcible seizure.

15. __ __ Violent sex offenses (e.g., sexual assault)

16. __ __ Manslaughter.

17. __ __ Attempted murder, conspiracy to commit murder.

18. __ __ Second degree murder.

19. __ __ First degree murder.

Official Recidivism:

Enter the number of offenses (i.e. charges and convictions) for each individual crime. If there are none, enter 0. This section is to be coded exclusively from the official records contained in CPIC files, and includes only charges and convictions ***after release*** *date.*

Nonviolent Offenses

1. __ __ Theft, break & enter, possession of housebreaking tools, possession of stolen property, theft of telecommunications, disguise with intent, forcible entry, unlawfully in a dwelling house.

2. __ __ Drug offenses (i.e., possession and trafficking).

3. __ __ Criminal negligence (includes serious driving offenses such as impaired or dangerous driving, failure to stop at the scene of an accident, hit- and run).

4. __ __ Fraud, forgery, false pretenses, impersonation, uttering, possession of stolen credit card.

5. __ __ Escape, unlawfully at large, prison breach.

6. __ __ Obstruction of justice, perjury, contempt of court, resist arrest, give contrary evidence.

7. __ __ Fail to appear in court, fail to comply with recognizance, fail to comply with probation order, breach of probation, breach of recognizance.

8. __ __ Miscellaneous offenses: vandalism, causing a disturbance, mischief, willful damage, trespassing, conspiracy to commit a non-violent offence, vagrancy, prostitution, minor driving offenses (e.g., driving while license suspended), public intoxication.

9. Date of first non-violent recidivism (yymmdd) ___/___/___.

Violent Offenses

10. __ __ Robbery, armed robbery, robbery with violence, extortion.

11. __ __ Arson, firesetting.

12. __ __ Uttering threats, participation in riot, intimidation.

13. __ __ Assault, assault causing bodily harm, wounding with intent, malicious wounding.

14. __ __ Possession of a weapon, possession of explosives, pointing a firearm.

15. __ __ Kidnapping, abduction, forcible confinement, forcible seizure.

16. __ __ Violent sex offenses (e.g., sexual assault)

17. __ __ Manslaughter.

18. __ __ Attempted murder, conspiracy to commit murder.

19. __ __ Second degree murder.

20. __ __ First degree murder.

21. Date of first violent recidivism (yymmdd) ___/___/___

22. Date of first revocation (yymmdd) ___/___/___

APPENDIX B

Coding Manual for Correctional Plans

Last Name & first initial _____ Subject # ___ ___ ___

FPS # ___ ___ ___ ___ ___ ___ ___ DOB (yymmdd): ____/ ____/ ____

Status: 1) incarcerated 2) supervision 3) deported 4) UAL 5) other

Sentence (years/ months/ days): ___ / ___ / ___ Sentence # _____

Accelerated Parole: 0) no 1) yes

Security Classification: 0) minimum 1) medium 2) maximum

Correctional Plan: 1) initial □ 2) update □

OMS OIA Date (yymmdd): ____/ ____/ ____

Completing Operational Unit: _____ Code ____ ___ ___
Insert name of institution

Version #: ___ Version Start Date (yymmdd): ___/ ___/ ___

Next Review Date (yymmdd): ___/ ___/ ___

CMS Group: 1) ES 2) LS 3) SI 4) CC

Risk / Needs Category: 1) low/low 2) low/med 3) low/high 4) med/low
5) med/med 6) med/high 7) high/low 8) high/med
9) high/high

Need1: ____
Principle Component1: ___ ___
Program Id1: __ __ __ __ __
Priority1 (low = 0; med = 1; high = 2): ____
Program target date1 (yymmdd): ___/ ___/ ___

Need2: ____
Principle Component2: ___ ___
Program Id2: __ __ __ __ __
Priority2 (low = 0; med = 1; high = 2): ____
Program target date2 (yymmdd): ___/ ___/ ___

Need3: ____
Principle Component3: ___ ___
Program Id3: __ __ __ __ __
Priority3 (low = 0; med = 1; high = 2): ____
Program target date3 (yymmdd): ___/ ___/ ___

Need4: ____
Principle Component4: ___ ___
Program Id4: __ __ __ __ __
Priority4 (low = 0; med = 1; high = 2): ____
Program target date4 (yymmdd): ___/ ___/ ___

Need5: ____
Principle Component5: ___ ___
Program Id5: __ __ __ __ __
Priority5 (low = 0; med = 1; high = 2): ____
Program target date5 (yymmdd): ___/ ___/ ___

Total # of Needs identified ___ ___
Total # of Principle components ___ ___
Total # of Programs ___ ___

Specific Program Objectives: 0) no 1) yes, not related to cplan
2) yes, related to cplan

Cplan completed by: _____ Date (yymmdd) ___/___/___
(Enter title)

APPENDIX C

Listing of all Need Indicators as Assessed by the Offender Intake Assessment Process

i) Education / Employment Indicators

1) Has less than grade 8
2) Has less than grade 10
3) Has no high school diploma
4) Finds learning difficult
5) Has learning disabilities
6) Has physical problems which interfere with learning
7) Has memory problems
8) Has concentration problems
9) Has problems with reading
10) Has problems writing
11) Has problems with numeracy
12) Has difficulty comprehending instructions
13) Lacks a skill area/trade/profession
14) Dissatisfied with skill area/trade/profession
15) Has physical problems that interfere with work
16) Unemployed at time of arrest
17) Unemployed 90% or more
18) Unemployed 50% or more
19) Has an unstable job history
20) Often shows up late for work
21) Has poor attendance record
22) No employment history
23) Has difficulty meeting workload requirements
24) Lacks initiative
25) Has quit a job without another
26) Has been laid off from work
27) Has been fired from a job
28) Salary has been insufficient
29) Lacks employment benefits
30) Jobs lack security
31) Has difficulty with co-workers
32) Has difficulty with supervisors
33) Prior vocational assessment(s)
34) Has participated in employment programs
35) Completed an occupational development program

ii) Marital Family Indicators

1) Childhood lacked family ties
2) Mother absent during childhood
3) Maternal relations negative as a child
4) Father absent during childhood
5) Paternal relations negative as a child
6) Parents relationship dysfunctional during childhood
7) Spousal abuse during childhood
8) Sibling relations negative during childhood
9) Other relative(s) relations negative during childhood
10) Family members involved in crime
11) Currently single
12) Has been married/common law in the past
13) Dissatisfied with current relationship
14) Money problems affect relationship(s) past/present
15) Sexual problems affect relationship(s) past/present
16) Communication problems affects the relationship(s)
17) Has been a victim of spousal abuse
18) Has been a perpetrator of spousal abuse
19) Has no parenting responsibilities
20) Unable to handle parenting responsibilities
21) Unable to control the child's behaviour appropriately
22) Perceives self as unable to control the child's behaviour
23) Supervises child improperly
24) Does not participate in activities with the child
25) Lacks an understanding of child development
26) Family is unable to get along as a unit
27) Has been arrested for child abuse
28) Has been arrested for incest
29) Prior marital/family assessment(s)
30) Has participated in marital/family therapy
31) Has completed a marital/family intervention program

iii) Associates / Social Interaction Indicators

1) Socially Isolated
2) Associates with substance abusers
3) Many criminal acquaintances
4) Mostly criminal friends
5) Has been affiliated with a gang
6) Resides in a criminogenic area
7) Unattached to any community groups
8) Relations are described as predatory
9) Often victimized in social relations
10) Easily influenced by others
11) Has difficulty communicating with others

iv) Substance Abuse Indicators

1) Abuses alcohol
2) Began drinking at an early age
3) Drinks on a regular basis
4) Has a history of drinking binges
5) Has combined the use of alcohol and drugs
6) Drinks to excess during leisure time
7) Drinks to excess in social situations
8) Drinks to relieve stress
9) Drinking interferes with employment
10) Drinking interferes with marital / family relations
11) Drinking interferes with social relations
12) Drinking has resulted in law violations
13) Drinking interferes with health
14) Abuses drugs
15) Began using drugs at an early age
16) Used drugs on a regular basis
17) Has gone on drug-taking sprees
18) Has combined the use of different drugs
19) Uses drugs during leisure time
20) Uses drugs in social situations
21) Uses drugs to relieve stress
22) Drug use interferes with employment
23) Drug use interferes with marital / family relations
24) Drug use interferes with social relations
25) Drug use has resulted in law violations
26) Drug use interferes with health
27) Prior substance abuse assessments
28) Has participated in substance abuse treatment
29) Has completed substance abuse treatment

v) Community Functioning Indicators

1) Has unstable accommodation
2) Residence is poorly maintained
3) Has poor self-presentation
4) Has poor hygiene
5) Has physical problems
6) Had dental problems
7) Has dietary problems
8) Difficulty meeting bill payments
9) Has outstanding debts
10) Has no bank account
11) Has no credit
12) Has no collateral
13) Has problems writing
14) Unable to express self verbally
15) Has no hobbies
16) Does not participate in organized activities
17) Unaware of social services
18) Has used social assistance
19) Prior assessment for community functioning
20) Has participated in a community skills program
21) Has completed a community skills program

vi) Personal / Emotional Orientation Indicators

1) Feels especially self-important
2) Physical prowess problematic
3) Family ties are problematic
4) Ethnicity is problematic
5) Religion is problematic
6) Gang member
7) Unable to recognize problem areas
8) Has difficulties solving interpersonal problems
9) Unable to generate choices
10) Unaware of consequences
11) Goal setting is unrealistic
12) Has disregard for others
13) Socially unaware
14) Impulsive
15) Incapable of understanding the feelings of others
16) Narrow and rigid thinking
17) Aggressive
18) Assertion problem
19) Copes with stress poorly
20) Poor conflict resolution
21) Manages time poorly
22) Gambling is problematic
23) Has low frustration tolerance
24) Hostile
25) Worries unreasonably
26) Takes risks inappropriately
27) Thrill-seeking
28) Non-reflective
29) Not conscientious
30) Manipulative
31) Has difficulty performing sexually
32) Sexual identity problem
33) Inappropriate sexual preference(s)
34) Sexual attitudes are problematic
35) Low mental functioning
36) Diagnosed as disordered in the past
37) Diagnosed as disordered currently
38) Prior personal / emotional assessments
39) Prescribed medication in the past
40) Prescribed medication currently
41) Past hospitalization
42) Current hospitalization

43) Received outpatient services in the past
44) Received outpatient services prior to admission
45) Past program participation
46) Current program participation

vii) Attitude Indicators

1) Negative towards the law
2) Negative towards the police
3) Negative towards the courts
4) Negative towards corrections
5) Negative towards community supervision
6) Negative towards rehabilitation
7) Employment has no value
8) Marital / family relations have no value
9) Interpersonal relations have no value
10) Values substance abuse
11) Basic life skills have no value
12) Personal / emotional stability has no value
13) Elderly have no value
14) Women / men roles are unequal
15) Ethnically intolerant
16) Intolerant of other religions
17) Intolerant of disabled persons
18) Disrespectful of personal belongings
19) Disrespectful of public property
20) Disrespectful of commercial property
21) Supportive of domestic violence
22) Supportive of instrumental violence
23) Lacks direction
24) Non-conforming